	Case 16-18931-mdc Doc 153 Filed Docui		2/13/17 17:56:50	Desc Main
Fill in	this information to identify the case:			
Debto	name North Philadelphia Health System			
United	States Bankruptcy Court for the: EASTERN DISTRICT	OF PENNSYLVANIA		
Case i	number (if known) 16-18931-mdc			
	, <u></u>			Check if this is an
				amended filing
Ott:	oial Form 2064/P			
	cial Form 206A/B	ad Daraanal Drar	r4. r	
	nedule A/B: Assets - Real ar se all property, real and personal, which the debtor ow			12/15
or une Be as o the del	have no book value, such as fully depreciated assets of xpired leases. Also list them on Schedule G: Executory complete and accurate as possible. If more space is ne btor's name and case number (if known). Also identify anal sheet is attached, include the amounts from the att	y Contracts and Unexpired Lease eded, attach a separate sheet to the form and line number to whice	es (Official Form 206G). this form. At the top of a ch the additional informa	any pages added, write
For Pa	art 1 through Part 11, list each asset under the appropr lule or depreciation schedule, that gives the details for	iate category or attach separate	supporting schedules, s	
debto Part 1	r's interest, do not deduct the value of secured claims.  Cash and cash equivalents	See the instructions to understa	nd the terms used in thi	is form.
	s the debtor have any cash or cash equivalents?			
<b>□</b> 1	No. Go to Part 2.			
	Yes Fill in the information below.	ahta.		Commont value of
All	cash or cash equivalents owned or controlled by the d	eptor		Current value of debtor's interest
3.	Checking, savings, money market, or financial broke Name of institution (bank or brokerage firm)	erage accounts (Identify all) Type of account	Last 4 digits of account number	
		Business Operating and Lock Box Accounts -		
	3.1. Citizens Bank	See Attachment A		\$557,083.75
4.	Other cash equivalents (Identify all)			
5.	Total of Part 1.			\$557,083.75
	Add lines 2 through 4 (including amounts on any addition	nal sheets). Copy the total to line 8	0.	
Part 2:				
	s the debtor have any deposits or prepayments?			
	No. Go to Part 3. Yes Fill in the information below.			
_	res i iii iii tile iiiioiiiiatioii below.			

Deposits, including security deposits and utility deposits 7.

Description, including name of holder of deposit

Net Cash Proceeds and Insurance Escrows Held by FHA Mortgage Servicer Debt Service and Debt Service Reserve Accounts Held by Trust Indenture Trustee Medical Malpractice Self Insurance Trust Reserve Held by U.S. Bank

7.1. See Attachment B

\$6,923,245.86

Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent 8. Description, including name of holder of prepayment

Official Form 206A/B

Schedule A/B Assets - Real and Personal Property

page 1

**Prepaid Expenses** 

\$257,764.00

# Case 16-18931-mdc Doc 153 Filed 02/13/17 Entered 02/13/17 17:56:50 Desc Main Document Page 2 of 9

Debtor	North Philadelphia Hea	rth Philadelphia Health System le			Case number (If known) 16-18931-mdc		
9.	<b>Total of Part 2.</b> Add lines 7 through 8. Copy the	total to line 81.			\$7,181,009.86		
Part 3:	Accounts receivable sthe debtor have any accounts	racaivable?					
	o. Go to Part 4.	receivable:					
	es Fill in the information below.						
11.	Accounts receivable						
	11a. 90 days old or less:	<b>3,091,897.00</b> e amount	doubtful or uncollect	0.00 =	\$3,091,897.00		
12.	Total of Part 3.				\$3,091,897.00		
	Current value on lines 11a + 11	b = line 12. Copy the tota	I to line 82.	_			
Part 4:	Investments sthe debtor own any investment						
Part 5:  18. <b>Does</b>	Inventory, excluding agrics the debtor own any inventory  O. Go to Part 6.  Ses Fill in the information below.  General description		Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest		
19.	Raw materials		,				
20.	Work in progress						
21.	Finished goods, including go	ods held for resale					
22.	Other inventory or supplies Healthcare Program Supplies (Inventory)		\$0.00	Recent cost	\$225,147.00		
23.	Total of Part 5.				\$225,147.00		
	Add lines 19 through 22. Copy	the total to line 84.					
24.	Is any of the property listed in  ■ No □ Yes	n Part 5 perishable?					
25.	Has any of the property listed  No  ☐ Yes. Book value	in Part 5 been purchase		e bankruptcy was filed?  Current Value			

Official Form 206A/B

Case 16-18931-mdc Doc 153 Filed 02/13/17 Entered 02/13/17 17:56:50 Desc Main Document Page 3 of 9

Debtor	North Philadelphia Health System  Name	Case	number (If known) 16-18931	I-mdc	
26.	Has any of the property listed in Part 5 been appraised by a professional within the last year?  ■ No □ Yes				
Part 6:	Farming and fishing-related assets (other than title				
27. <b>Doe</b> :	s the debtor own or lease any farming and fishing-relat	ed assets (other than titled	d motor vehicles and land)?		
	o. Go to Part 7. es Fill in the information below.				
Part 7:	Office furniture, fixtures, and equipment; and colle	ectibles			
38. <b>Doe</b> :	s the debtor own or lease any office furniture, fixtures,	equipment, or collectibles	?		
	o. Go to Part 8. es Fill in the information below.				
Part 8:	Machinery, equipment, and vehicles				
46. <b>Doe</b> :	s the debtor own or lease any machinery, equipment, o	r vehicles?			
	o. Go to Part 9. es Fill in the information below.				
	General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest	
47.	Automobiles, vans, trucks, motorcycles, trailers, and	titled farm vehicles			
48.	Watercraft, trailers, motors, and related accessories E floating homes, personal watercraft, and fishing vessels	Examples: Boats, trailers, mo	otors,		
49.	Aircraft and accessories				
50.	Other machinery, fixtures, and equipment (excluding machinery and equipment) Office and Healthcare Programs Furniture and Equipment	farm			
	Net of Depreciation	Unknown	Comparable sale	\$350,000.00	
51.	Total of Part 8.			\$350,000.00	
	Add lines 47 through 50. Copy the total to line 87.		_	4000,000.00	
52.	Is a depreciation schedule available for any of the pro ☐ No	perty listed in Part 8?			
	■ Yes				
53.	Has any of the property listed in Part 8 been appraised ■ No	d by a professional within	the last year?		
	☐ Yes				
Part 9:	Real property s the debtor own or lease any real property?				
	o. Go to Part 10. es Fill in the information below.				

Official Form 206A/B

Entered 02/13/17 17:56:50 Case 16-18931-mdc Doc 153 Filed 02/13/17 Page 4 of 9 Document

Debtor North Philadelphia Health System Case number (If known) 16-18931-mdc 55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest **Description and location of** Nature and Net book value of Valuation method used **Current value of** property extent of debtor's interest for current value debtor's interest Include street address or other debtor's interest (Where available) description such as Assessor in property Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building, if available. 55.1. **1600-50 W. Girard** Ave, Phila. PA 19130 Philadelphia OPA No. 772018000 Unoccupied, Former St. Joseph's Hospital Value predicated upon both Appraisal and current offer to Fee simple Unknown **Appraisal** \$8,117,000.00 purchase 55.2. **801 W. Girard Ave,** Phila. PA 19122 Phila. OPA No. 771032100 **Main Girard Medical** Fee simple \$0.00 **Appraisal** \$18,520,000.00 **Center Campus** 1300-42 N. 8th St, Phila. PA 19122 Phila, OPA No. 772020000 Fee simple \$0.00 **Appraisal** \$9,120,000.00 **Parking Lot** 55.4. 1301-25 N. 8th St. Phila PA Phila. OPA No. 772021000 Parking Lot Value predicated upon both appraisal and prepetition sale Fee simple Unknown **Appraisal** \$1,750,000.00 agreement 55.5. 1330 N. Perth St, Phila, PA Phila. OPA No. 885466220 Parking Lot (Value included in Fee simple Unknown **Appraisal** \$0.00 1301-15 N. 8th St) 56. Total of Part 9. \$37,507,000.00

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.

57. Is a depreciation schedule available for any of the property listed in Part 9?

# Case 16-18931-mdc Doc 153 Filed 02/13/17 Entered 02/13/17 17:56:50 Desc Main Document Page 5 of 9

Debtor		Case	number (If known) <b>16-1893</b>	1-mdc
	Name			
	□ No			
	Yes			
58.	Has any of the property listed in Part 9 been appraised	d by a professional within	the last year?	
	□ No ■ Yes			
Part 10: 59. <b>Doe</b> s	Intangibles and intellectual property s the debtor have any interests in intangibles or intellec	tual property?		
	o. Go to Part 11.	,		
	es Fill in the information below.			
		Not book value of	Valuation mathed used	Current value of
	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60.	Patents, copyrights, trademarks, and trade secrets			
61.	Internet domain names and websites			
62.	Licenses, franchises, and royalties			
	Healthcare Program Licenses Commonwealth of Pennsylvania	\$0.00		Unknown
	- Commonwealth of Formey Warna	· ·		
63.	Customer lists, mailing lists, or other compilations			
64.	Other intangibles, or intellectual property			
65.	Goodwill			
66.	Total of Part 10.			\$0.00
	Add lines 60 through 65. Copy the total to line 89.			
67.	Do your lists or records include personally identifiable	e information of customer	s (as defined in 11 U.S.C.§§ 1	01(41A) and 107 <b>?</b>
	■ No		,	, ,
	☐ Yes			
68.	Is there an amortization or other similar schedule available.	lable for any of the prope	rty listed in Part 10?	
	No			
	☐ Yes			
69.	Has any of the property listed in Part 10 been appraise	ed by a professional within	n the last year?	
	■ No			
	☐ Yes			
Part 11:		n reported on this form?		
	s the debtor own any other assets that have not yet bee de all interests in executory contracts and unexpired leases		this form.	
□ No	o. Go to Part 12.			
■ Ye	es Fill in the information below.			
				Current value of
				debtor's interest
74	Notes ressiveble			
71.	Notes receivable			

Description (include name of obligor)

72. Tax refunds and unused net operating losses (NOLs)

# Case 16-18931-mdc Doc 153 Filed 02/13/17 Entered 02/13/17 17:56:50 Desc Main Document Page 6 of 9

Debtor	North Philadelphia	Health System	Case number (If known)	16-18931-mdc	
	Description (for example, f	ederal, state, local)			
73.	Interests in insurance po T/U/W Charles English Other Perpetual Chari Interest in Income Dis See SOFA No. 2 for In Charitable Trusts	n, Deceased \$690,000; able Trusts:			\$690,000.00
74.	Causes of action against has been filed) NPHS v. Rahn and Pas U.S. Dist. Court, E. Dis Docket No. 16-cv-0391 Nature of claim	t. Penn.			\$200,000.00
	Amount requested	escrow account. \$200,000.00			
75.		iquidated claims or causes of action of ounterclaims of the debtor and rights to			
76.	Trusts, equitable or futur	e interests in property			
77.	Other property of any kir country club membership	d not already listed Examples: Season tickets	<b>S</b> ,		
78.	Total of Part 11.				\$890,000.00
	Add lines 71 through 77. C	opy the total to line 90.			
79.	Has any of the property I ■ No □ Yes	isted in Part 11 been appraised by a profess	ional within the last year?		

Case 16-18931-mdc Doc 153 Filed 02/13/17 Entered 02/13/17 17:56:50 Desc Main Document Page 7 of 9

Debtor North Philadelphia Health System Case number (If known) 16-18931-mdc

Name

## Part 12: Summary

Part 12 copy all of the totals from the earlier parts of the form Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets.  Copy line 5, Part 1	\$557,083.75	
81. Deposits and prepayments. Copy line 9, Part 2.	\$7,181,009.86	
32. Accounts receivable. Copy line 12, Part 3.	\$3,091,897.00	
33. Investments. Copy line 17, Part 4.	\$0.00	
34. Inventory. Copy line 23, Part 5.	\$225,147.00	
5. Farming and fishing-related assets. Copy line 33, Part 6.	\$0.00	
66. Office furniture, fixtures, and equipment; and collectibles.  Copy line 43, Part 7.	\$0.00	
7. Machinery, equipment, and vehicles. Copy line 51, Part 8.	\$350,000.00	
8. Real property. Copy line 56, Part 9	>	\$37,507,000.00
89. Intangibles and intellectual property. Copy line 66, Part 10.	\$0.00	
90. All other assets. Copy line 78, Part 11.	+\$890,000.00	
91. <b>Total.</b> Add lines 80 through 90 for each column	\$12,295,137.61	<b>+</b> 91b. <b>\$37,507,000.00</b>
22. <b>Total of all property on Schedule A/B</b> . Add lines 91a+91b=92		\$49,802,137.6

Case 16-18931-mdc Doc 153 Filed 02/13/17 Entered 02/13/17 17:56:50 Desc Main Document Page 8 of 9

Schedules A and B, Item 3, Attachment A <u>Debtor's Bank Accounts</u>

### ACCOUNTS CONTROLLED BY THE DEBTOR

Account Title	Bank Name	Bank Acct. #	Purpose of Account
Main Operating Account	Citizen's Bank	xxxx-7832	Operating activities
Payroll Account	Citizen's Bank	xxxx-7840	Payroll
Government Account	Citizen's Bank	xxxx-8654	Government deposits
Commercial Account	Citizen's Bank	xxxx-8646	Third-party managed care deposits

# Case 16-18931-mdc Doc 153 Filed 02/13/17 Entered 02/13/17 17:56:50 Desc Main Document Page 9 of 9

Schedules A and B, Item 7, Attachment B Debtor's Deposits with Third Parties

Funds Held by FHA Mortgage Servicer, Net Proceeds from Property Sales	\$1,495,323.31
Property-Liability Insurance Escrows	\$963,180.82
Total	\$2,458,504.13
Funds Held by The Bank of New York Mellon Trust Co., N.A.: Bond Debt Service Reserve Accounts (Bayern LB NYC)	\$3,781,955.85
All Other BNYM Bond Accounts	\$74,876.95
Total	\$3,856,832.80
U.S. Bank Account - Former Hospital Self-Insurance Plan	\$607,908.93
Grand Total	\$6,923,245.86